

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

DOUGLAS COUNTY DEMOCRATIC WOMEN

Name (print) P.O. Box 939 MINDEN NV 89423

District (if applicable)

Telephone No. 265-2025

Mailing Address (include city and zip code)

E-Mail Address DDW1@CHARTER.NET

Select Appropriate Box(es) ☐ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

☒ **Report #1 Due — March 29, 2005**
Period: Jan. 1, 2005 - Mar. 24, 2005

☐ **Report #2 Due — May 31, 2005**
Period: Mar. 25, 2005 — May 26, 2005

☐ **Report #3 Due — July 15, 2005**
Period: May 27, 2005 — June 30, 2005

☐ **Annual Filing — Due January 15, 2006**
Period: January 1, 2005 — December 31, 2005

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170 FILE Kg
MAY 31 2005
DEAN HELLER SECRETARY OF STATE

CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100

2. Total Monetary Contributions Received of \$100 or Less

3. Total Amount of Monetary Contributions Received
(Add Lines 1 and 2)

4. Total Value of In Kind Contributions Received in Excess of \$100

This Period

Cumulative From Beginning of Report Period #1 through End of This Reporting Period

3354.00	3354.00
1,611.00	1,611.00

This Period

Cumulative From Beginning of Report Period #1 Through End of This Reporting Period

4965.00	4965.00
0	

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

6. Total Monetary Expenses Paid of \$100 or Less

7. Total Amount of All Monetary Expenses Paid
(Add Lines 5 and 6)

8. Total Value of In Kind Expenses in Excess of \$100

620.00	620.00
325.60	325.60
945.60	945.60

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Juanita Clark Treasurer

Signature

Date

CAMPAIGN CONTRIBUTIONS

Report Period # /

DOUGLAS County DEMOCRATE Women

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
JESSICA L. LEDBETTER 575 ST RT 88 GARDNERVILLE NV 89460	01/27/2005	150 ⁰⁰	
RANEE T. BARSANTI 575 ST RT 88 GARDNERVILLE NV 89460	01/27/2005	150 ⁰⁰	
RANEE T. BARSANTI 575 ST RT 88 GARDNERVILLE NV 89460	03/24/2005	100 ⁰⁰	
JESSICA L. LEDBETTER 575 STATE ROUTE 88 GARDNERVILLE NV 89460	03/4/2005	100 ⁰⁰	
CINDY TRIGG 238 TERRACE VIEW STATELINE NV 89449	03/04/2005	100 ⁰⁰	
DAKATO EVANS 1345 KIMMELING #B GARDNERVILLE, NV 89460	03/15/2005	100 ⁰⁰	
GRETA HAMMBACH P.O. BOX 5787 STATELINE NV 89449	03/15/2005	100 ⁰⁰	
ANN HARKON P.O. BOX 3539 STATELINE NV 89449	03/15/2005	100 ⁰⁰	
MIKE OLIVAS % PO BOX 294 ZEPHYR CONE NV 89448	03/15/2005	100 ⁰⁰	
MARIE C JOHNSON 176 HIGHWAY 88 GARDNERVILLE NV 89460	03/15/2005	100 ⁰⁰	
BEZITA S Crosby 2533 LENA COURT MINDEN NV 89423	1/17/2005	100 ⁰⁰	

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CAMPAIGN CONTRIBUTIONS

Report Period # /

DOUGLAS County Democratic Women

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
JOYCE HOLLISTER PO BOX 218 GENOA NV 89444	1/17/2005	100 ⁰⁰	
GRETA G. HAMBSCH P.O. BOX 5787 STATELINE NV 89449	1/17/2005	100 ⁰⁰	
JESSICA L. LEDBETTER 575 ST RT 88 GARDNERVILLE NV 89460	1/17/2005	100 ⁰⁰	
RANEE T. BARSANTI 575 ST RT 88 GARDNERVILLE NV 89460	1/17/2005	100 ⁰⁰	
PHYLIS B. GOOT P.O. BOX 5158 STATELINE NV 89449	1/17/2005	100 ⁰⁰	
CINDY TRIGG 238 TERRACE VIEW STATELINE, NV 89449	1/17/2005	100 ⁰⁰	
JOANN ORANGE PO BOX 2748 MINDEN NV 89423	1/24/2005	100⁰⁰	
ANN HARMON P.O. BOX 3539 STATELINE NV 89449	2/8/2005	100 ⁰⁰	
ALLEN H ROSS 1027 RANCH DR GARDNERVILLE NV 89460	3/11/2005	100 ⁰⁰	
KAY K. ROSS 1027 RANCH DR GARDNERVILLE, NV 89460	3/11/2005	100 ⁰⁰	
JOANN L ORANGE P.O. BOX 2748 MINDEN NV 89423	1/27/2005	154 ⁰⁰	

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CAMPAIGN CONTRIBUTIONS

Report Period # /

Name (print) DOUGLAS County Democratic Women Office (if applicable) District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
DOUGLAS COUNTY DEMOCRATIC CENTER COMMITTEE PO BOX MINDEN NV 89423	3/15/2005	1000 ⁰⁰	
KARA M HAYES PO BOX 1506 MINDEN NV 89423	11/24/2005	106 ⁰⁰	

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CAMPAIGN EXPENSES

Report Period

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DOUGLAS County DEMOCRATIC Women

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

CAMPAIGN EXPENSES

Report Period # 1

Douglas County Democratic Women

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100
Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
DOUGLAS County School District 751 MONROE AVE MINDEN NV 89423	H	3/15/2005	120 ⁰⁰
SUSAN G. ROMEN BREAST CANCER P.O. BOX 650309 DALLAS, TX 75265-0309	H	1/27/2005	500 ⁰⁰

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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

**IN KIND CAMPAIGN
CONTRIBUTIONS**

Report Period

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DOUGLAS County Democratic Women

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN

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**IN KIND CAMPAIGN
EXPENSES**

Report Period # 1

Name (print) Douglas County Democratic Women

Office (if applicable)

District (if applicable)

IN KIND

Expenses in Excess of \$100

Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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